

Child's Name: _____ Parent's Name: _____

- ♦ Please read all information before submitting your forms.
- ♦ If you have an outstanding balance with DPRCS (Camp/LEAL) your forms will not be processed.
- ♦ Completed forms and fees for two months per child will be accepted **by mail only, postmarked no earlier than June 24th and no later than August 24th** (we want to provide everyone the same opportunity to register).
- ♦ If forms are received after August 24th your child will not be able to start AM/PM LEAL until Mon. Sept. 12th.
- ♦ Monthly fees are the responsibility of the person registering the child for the program.
(You are responsible for payment for services until we receive a letter stating that services are to be discontinued.)
- ♦ All payments are due one month in advance by the 10th for the remainder of the year.
- ♦ If registering mid-year a fee for the current month and the next month must be submitted.

PAYMENTS ARE NON-REFUNDABLE - When our office receives your registration form we make a commitment to your family to provide childcare for the upcoming months, saving a spot for your child/children in our program until you withdraw.

- ➔ **Parent/Guardian Signature:** _____
- ♦ I have read all the information and I have kept a copy for my records. I have enclosed the required pictures. I understand if I withdraw my child from the program, I must notify Project LEAL in writing or I will be required to continue paying the monthly fees. (When our office receives your payment, we make a commitment to your family to provide childcare for the upcoming month, which in turn excludes another family from joining our program.)

➔ **Parent/Guardian Signature:** _____

Family Photo Gallery

A current picture of each child and any/all adults designated to pick-up your child must be submitted with the registration forms and the September/October payment or your forms will not be processed.

Tape child's photo here	Tape child's photo here	Tape child's photo here	Tape Adult's photo here	Tape Adult's photo here
--------------------------------	--------------------------------	--------------------------------	--------------------------------	--------------------------------

Child's Name

Child's Name

Child's Name

Adult's Name

Adult's Name

Tape Adult's photo here	Tape Adult's photo here	Tape Adult's photo here	Tape Adult's photo here	Tape Adult's photo here
--------------------------------	--------------------------------	--------------------------------	--------------------------------	--------------------------------

Adult's Name

Adult's Name

Adult's Name

Adult's Name

Adult's Name

COMPLETE, SIGN & RETURN

Frequently Asked Questions

Are there any children whose needs would preclude participation in the program?

Yes. Our program is not an educational institution nor are the staff trained to deal with severe behavioral problems. We offer a recreational program that takes the shape and format of a “day at camp” and to that end, our staff are able to provide the assistance for a child with mild special needs to participate in and enjoy the program activities. Any child whose behavior includes biting, throwing objects, hitting, kicking, pinching staff or participants or demonstrates any other behavior that would put themselves or others at risk would not be appropriate for the program. We do not have the skill or resources necessary to provide for their needs and maintain the safety of the staff and participants.

Are there any types of behavior that would force us to discontinue a child’s participation in the program?

Yes. Biting, throwing objects, hitting, kicking, pinching staff or participants or if a child demonstrates any other behavior that would put themselves or others at risk would not be appropriate for the program. Unfortunately, at the first instance where a dangerous behavior takes place, the participant will not be allowed to continue in the program.

With all the discussion over inclusion and main streaming, why should I consider sending my child to a program that is designated for children with special needs and not to North Brunswick Summer Camp/Project LEAL?

Many children have not met success in “typical, mainstream programs” for a variety of reasons. A child’s recreation program should be stress-free, successful, and fun but should also build skills and prevent regression. Your child should be able to develop friendships during programs. If you find a typical, mainstream recreation program that can accommodate your child and deliver these expectations then that is great! Programs that we offer are the same type of programming as typical mainstream recreation programs.

What is the size of the group my child will be in?

Summer Camp groups are (40) forty children with (4) four counselors. Project LEAL groups are (30) thirty children with (3) three counselors and they share space with other groups of children.

Are there scholarships available?

Residents needing financial assistance are encouraged to speak with the Coordinator of Camp/Project LEAL or call Community Child Care Solutions for financial assistance (732) 324-4357. If your child is registered with the New Jersey Division of Development Disabilities there may be financial assistance available (note: not all children with special needs are eligible for DDD).

Who are the staff?

The Supervisors are a mixture of Adults in/beyond their twenties that are Teachers, College Graduates or College Students. Our Group Leaders are a mixture of College and High School Students and/or Graduates.

Can you describe a typical participant?

Children, who, regardless of their special education classification, would be able to function in a mainstream recreational program but due to minimal/moderate special needs, require activities to be adapted to his/her skill level.

If a child requires medication during the program day, are there nurses on staff who will administer the medications?

No. Our staff is not permitted to dispense any type of medication.

If a child is a resident of North Brunswick Township, are they guaranteed admission into the program?

No. Enrollment is limited and once the program has met maximum capacity a wait list will be created.

Must the required fees on the registration form be submitted at the same time as the registration materials?

Yes, we will not process forms that are received without full payment. If your family has a balance for any other program within Parks, Recreation and Community Services you will not be permitted to enroll until the balance is paid or arrangements have been made.

Project LEAL Policies

Take the time to read through the information below and keep for your reference

E-mail it... Specific questions or concerns regarding your child/the staff at your child's school should be directed to Giovanna Branciforte at Gbranciforte@northbrunswicknj.gov and inquiries regarding payment, change of days, termination of services should be sent to both gbranciforte@northbrunswicknj.gov and Tangie Cobb at tcobb@northbrunswicknj.gov

REGISTRATION

REGISTRATION FEES: Payments are due one month in advance on or before the 10th. A \$30 late fee will be applied to payments received after the 10th. Payments should be made by check, money order or credit card, payable to Township of North Brunswick-LEAL at the DPRCS office only - NO CASH PLEASE. Each payment should be sent in with a completed coupon to ensure proper adjustments on your account and you should write your child's name on the check. Payment is the responsibility of the parent signing the child up for Project LEAL.

CREDIT CARD PAYMENTS: Visa or Mastercard are accepted in person only. Due to a security changes by the Credit Card Companies we now require parents to visit DPRCS in person to pay by Credit Card.

CHANGES: As always it is important for you to keep us updated regarding any changes in your child's registration information. This should be accomplished through the DPRCS office using a Registration Change form, which is in the back of the payment coupon book.

TERMINATION OF SERVICES: You are responsible for payment for services until a written letter has been received by our office stating that services are being discontinued. Payments are non-refundable **(When our office receives your payment, we make a commitment to your family to provide childcare for the upcoming month, which in turn excludes another family from joining our program.)** The letter should be sent to Project LEAL, 710 Hermann Road, do not try to accomplish this at the main office of your child's school.

Children with Disabilities (ADA): All DPRCS activities are accessible to the disabled. If your child has special needs, please notify us via phone or in person prior to registering so we can better accommodate your family.

Keep in mind that counselors are to provide supervision for all children. If there is a matter you wish to discuss be sure to approach the Supervisor of your child's group or the on-Site Supervisor.

AM LEAL

SIGN IN - All children must be walked in and signed in for AM LEAL. AM LEAL opens at 7:00 am. Do not arrive prior to 7:00 am and do not leave your children in the room if a staff member is not present. All children registered for 7:30 am or 8:00 am, may not be signed-in before that time.

BREAKFAST - The staff serves breakfast until 8:00am. If you arrive after 8:00 am please be sure to bring breakfast for your child. If you arrive after 8:25 am, your child will be considered a walker and will need to wait outside the building.

DELAYED OPENING - If the BOE deems it necessary to have a delayed opening, AM LEAL is cancelled. For the safety of the staff and your family we do not host AM LEAL if unsafe conditions are present. You may call any LEAL site for information regarding LEAL cancellation or school delayed opening/closing.

PM LEAL

ABSENCES: It is your responsibility to call the site to inform PM LEAL staff that your child will not be at Project LEAL on a given day. This request is to ensure adequate supervision for the children on site that day, to avoid confusion during attendance time and to be sure your child in your care.

EMERGENCY DISMISSALS: Occasionally there will be an emergency closing at LEAL due to weather or other instances where the BOE and DPRCS deems it unsafe for children to be on site. Parents are expected to cooperate 100% and pick up by the designated time. Failure to do so may result in a late fee or dismissal from our program.

NOTICES & INFORMATION: Calendars and other notices will be placed near the sign out sheet. It is your responsibility to take the information home and read through it.

SIGN-OUT - A parent/an adult designated by the parent must pick up and sign out children attending PM LEAL. If your child is picked-up after 6:00 pm a late will be applied - \$25.00 for the first 15 minutes, \$1.00 for each minute thereafter. After the third instance, enrollment in our program is subject to termination.

Discipline Policy

In an effort to formulate, adopt and disseminate a discipline policy for youth activity

PARTICIPANTS, PARENTS and STAFF, The Township of North Brunswick Department of Parks, Recreation and Community Services have selected existing guides and ideas from other programs and agencies and, where necessary, adapted them for our local needs.

Definition: The dictionary states that discipline is “training that develops self-control, character or orderliness and efficiency.”

A serious disciplinary problem is one in which a child is hampering the smooth flow of the program by either requiring constant one-on-one attention; is inflicting physical or emotional harm on other children; is physically abusing staff or is otherwise unable to conform to the rules and guidelines of the program.

When conflicts over the rights of other people and property develop, it is our goal to work with the individual youths, listening to what each has to say and helping to resolve the conflict through effective communication.

When conflicts exist:

- **A child may not be allowed to participate in the particular activity where conflict exists for a period of time. A good rule of thumb is that a child should not sit out more than his/her age in total minutes per incident.**
- **If an unresolved conflict continues, the parent may be asked to keep the youth at home for a number of sessions/days until the youth is ready to cooperate.**
- **If upon return the conflict still exists, parents will be expected to permanently remove the youth from the program.**

Our program follows a strict no-contact policy. Be sure to reinforce our “keep you hands to yourself” motto while your child is attending any and all of our activities.

Code of Conduct

The Department of Parks, Recreation & Community Services advocates and supports youth and adult programs in North Brunswick. The DPRCS staff prides itself in offering educational opportunities through leisure experiences. Participation in DPRCS programs is subject to the observance of DPRCS rules and procedures. The activities outlined below are strictly prohibited. Any participant or staff member who violates this Code is subject to discipline, up to and including removal from the program.

- Abusive language towards a staff member, volunteer or another participant
- Possession/use of alcoholic beverages or illegal drugs on North Brunswick Township property or reporting to the program while under the influence of drugs or alcohol.
- Bringing onto North Brunswick Township property dangerous or unauthorized materials such as firearms, weapons or other similar items.
- Discourtesy or rudeness to a fellow participant, staff member or volunteer
- Verbal, physical or visual harassment of another participant, staff member or volunteer
- Conduct endangering the life, safety, health, or well-being of others
- Failure to follow any Department of Parks, Recreation & Community Services policy or procedure
- Bullying or taking unfair advantage of any participant
- Failing to cooperate with adult supervisor / leader / mentor
- Failure to leave area in the condition in which you found it, including restrooms, gym, hallways and any other area used.

EXPULSION POLICY

Unfortunately sometimes there are reasons we have to expel a child from our program either on a short term and/or permanent basis. We will do everything possible to work with the family of the child in order to prevent this from occurring. The following are reasons are why we may have to suspend/terminate a child from our program:

PARENTAL ACTIONS FOR CHILD'S EXPULSION

- ☐ Failure to pay/habitual lateness in payments
- ☐ Failure to complete required forms including the child's immunization records.
- ☐ Habitual tardiness when picking up your child.
- ☐ Physical or verbal abuse to staff
- ☐ Other (Explain)

CHILD'S ACTIONS FOR EXPULSION

- ☐ Failure of child to adjust after a reasonable amount of time.
- ☐ Uncontrollable tantrums/angry outbursts.
- ☐ Ongoing physical or verbal abuse to staff or other children.
- ☐ Excessive biting
- ☐ Other (explain)

PROACTIVE ACTIONS THAT WILL BE TAKEN IN ORDER TO PREVENT EXPULSION

- ☐ Staff will try to redirect child from negative behavior.
- ☐ Staff will reassess classroom environment, appropriate of activities, supervision.
- ☐ Staff will always use positive methods and language while disciplining children.
- ☐ Staff will praise appropriate behaviors.
- ☐ Staff will consistently apply consequences for rules.
- ☐ Child will be given verbal warnings.
- ☐ A brief time-out will be given so child can regain control.
- ☐ Child may lose certain privileges (Explain)
- ☐ Child's disruptive behavior will be documented and maintained in confidentiality.
- ☐ Parent/guardian will be notified verbally.
- ☐ Parent/guardian will be given written copies of the disruptive behaviors that might lead to expulsion.
- ☐ The director, staff, and parent/guardian will have a conference(s) to discuss how to promote positive behaviors.
- ☐ The parent will be given literature or other resources regarding methods of improving behavior.

- If after the remedial actions above have not worked, the child's parent/guardian will be advised verbally and in writing about the
- ☐ child's or parent's behavior warranting an expulsion. An expulsion action is meant to be a period of time so that the parent/guardian may work on the child's behavior or to come to an agreement with the center.
 - ☐ The parent/guardian will be informed regarding the length of expulsion period.
 - ☐ The parent/guardian will be informed about the expected behavioral changes required in order for the child or parent to return to the center.
 - ☐ The parent/guardian will be given a specific expulsion date that allows the parent adequate time to seek alternate child care (approximately one-two weeks notice depending on risk to other children's welfare or safety)
 - ☐ Failure of the child/parent to satisfy the terms of the plan may result in permanent expulsion from the center.
 - ☐ Child's disruptive behavior will be documented and maintained in confidentiality.
 - ☐ Parent/guardian will be notified verbally.
 - ☐ Parent/guardian will be given written copies of the disruptive behaviors that might lead to expulsion.
 - ☐ The director, classroom staff, and parent/guardian will have a conference(s) to discuss how to promote positive behaviors.
 - ☐ The parent will be given literature or other resources regarding methods of improving behavior.

EXPULSION POLICY

SCHEDULE OF EXPLUSION

- ☐ If after the remedial actions above have not worked, the child's parent/guardian will be advised verbally and in writing about the child's or parent's behavior warranting an expulsion. An expulsion action is meant to be a period of time so that the parent/guardian may work on the child's behavior or to come to an agreement with the center.
- ☐ The parent/guardian will be informed regarding the length of expulsion period.
- ☐ The parent/guardian will be informed about the expected behavioral changes required in order for the child or parent to return to the center.
- ☐ The parent/guardian will be given a specific expulsion date that allows the parent an adequate amount of time to seek alternate child care (approximately one to two weeks notice depending on risk to other children's welfare or safety)
- ☐ Failure of the child/parent to satisfy the terms of the plan may result in permanent expulsion from the center.

A CHILD WILL NOT BE EXPELLED

- ☐ If a child's parent (s):
 - Made a complaint to the Office of Licensing regarding a center's alleged violations of requirements (1-877-667-9845)
 - Reported abuse or neglect occurring at the center. (1-877-652-2873)
 - Questioned the center regarding policies and procedures.
- ☐ Without giving the parent an adequate amount of time to make other child care arrangements

Policy on the release of children

Each child may be released only to the child's parent(s) or person(s) authorized by the parent(s) to take the child from the center and to assume responsibility for the child in an emergency if the parent(s) cannot be reached.

If a non-custodial parent has been denied access, or granted limited access, to a child by a court order, the center shall secure documentation to that effect, maintain a copy on file, and comply with the terms of the court order.

If the parent(s) or person(s) authorized by the parent(s) fails to pick up a child at the time of the center's daily closing, the center shall ensure that:

- 1) The child is supervised at all times;
- 2) Staff members attempt to contact the parent(s) or person(s) authorized by the parent(s); and
- 3) An hour or more after closing time, and provided that other arrangements for the releasing the child to his/her parent(s) or person(s) authorized by the parent(s), have failed and the staff member(s) cannot continue to supervise the child at the center, the staff member shall call the Division's 24 hour Child Abuse Hotline (1-800-792-8610) to seek assistance in caring for the child until the parent(s) or person(s) authorized by the child's parent(s) is able to pick-up the child.

If the parent(s) or person(s) authorized by the parent(s) appears to be physically and/or emotionally impaired to the extent that, in the judgment of the director and/or staff member, the child would be placed at a risk of harm if released to such an individual, the center shall ensure that:

- 1) The child may not be released to such an impaired individual:
- 2) Staff members attempt to contact the child's other parent or an alternative person(s) authorized by the parent(s) and
- 3) If the center is unable to make alternative arrangements, a staff member shall call the Division's 24 hour Child Abuse Hotline (1-800-792-8610) to seek assistance in caring for the child

For school-age child care programs, no child shall be released from the program unsupervised except upon written instruction from the child's parent(s)

10:122-7.11 Information to parents regarding the management of communicable diseases To be distributed to parents

Policy on the management of communicable diseases

If a child exhibits any of the following symptoms, the child should not attend the program. If such symptoms occur during the program, the child will be removed from the group, and parents will be called to take children home. Once the child is symptom-free, or has a health care provider's note stating that the child no longer poses a serious health risk to himself/herself or others, the child may return to the center.

Table of excludable communicable diseases

Severe pain or discomfort	Red eyes with discharge	Difficult or rapid breathing
Acute diarrhea	Yellow eyes or jaundice skin	Skin lesions that are weeping or bleeding
Episodes of acute vomiting	Infected, untreated skin patches	Mouth sores with drooling
Lethargy	Elevated oral temperature of 101.5° F	Stiff neck
Severe Coughing	Skin Rashes in conjunction with fever or behavior changes	

If a child is exposed to an excludable disease while at the program, parents will be notified in writing.

A child who contracts any of the following diseases **may not** return to the program without a note from a health care provider's stating the child presents no risk to himself /herself or others.

Respiratory Illnesses

Chicken pox**	Whooping Cough *
German Measles*	Tuberculosis *
Hemophilus Influenza *	Strep Throat
Measles *	Mumps *
Meningococcus *	

Gastrointestinal Illnesses

Campylobacter *
Escherichia coli *
Giardia Lamblia *
Hepatitis A *
Salmonella *
Shigella *

Contact Illnesses

Impetigo
Lice
Scabies
Shingles

*Reportable diseases that must be reported to the health department by the program.

**Note: If a child has chicken pox, a health care provider note is not required for re-admitting the child to the program. A note from the parent is required, stating either that at least six days has elapsed since the onset of the rash or that all the sores have been dried and crusted.

DYFS - Information to Parent Statement

Under provisions of the Manual of Requirements for Child Care Centers (N.J.A.C. 10:122), every licensed child care center in New Jersey must provide to parents of enrolled children written information on parent visitation rights, State licensing requirements, child abuse/neglect reporting requirements and other child care matters. The center must comply with this requirement by reproducing and distributing to parents this written statement, prepared by the Bureau of Licensing in the Division of Youth and Family Services (DCF). In keeping with this requirement, the center must secure every parent's signature attesting to his/her receipt of the information.

* * * * *

Our center is required by the State Child Care Center Licensing law to be licensed by the Office of Licensing, Child Care & Youth Residential Licensing, in the Department of Children and Families (DCF). A copy of our current license must be posted in a prominent location at our center. Look for it when you're in the center.

To be licensed, our center must comply with the Manual of Requirements for Child Care Centers (the official licensing regulations). The regulations cover such areas as: physical environment/life-safety; staff qualifications, supervision, and staff/child ratios; program activities and equipment; health, food and nutrition; rest and sleep requirements; parent/community participation; administrative and record keeping requirements; and others.

Our center must have on the premises a copy of the Manual of Requirements for Child Care Centers and make it available to interested parents for review. If you would like to review our copy, just ask any staff member. Parents may secure a copy of the Manual of Requirements by sending a check or money order for \$5 made payable to the "Treasurer, State of New Jersey", and mailing it to: State of New Jersey, Department of Children and Families, Office of Licensing Publication Fees, PO Box 657, Trenton, New Jersey 08646-0657.

We encourage parents to discuss with us any questions or concerns about the policies and program of the center or the meaning, application or alleged violations of the Manual of Requirements for Child Care Centers. We will be happy to arrange a convenient opportunity for you to review and discuss these matters with us. If you suspect our center may be in violation of licensing requirements, you are entitled to report them to the Office of Licensing toll free at 1(877-667-9845). Of course, we would appreciate your bringing these concerns to our attention too.

Our center must have a policy concerning the release of children to parents or people authorized by parent(s) to be responsible for the child. Please discuss with us your plans for your child's departure from the center.

Our center must have a policy about administering medicine and health care procedures and the management of communicable diseases. Please talk to us about these policies so we can work together to keep our children healthy.

Our center must have a policy concerning the expulsion of children from enrollment at the center. Please review this policy so we can work together to keep your child in our center.

Parents are entitled to review the center's copy of the Office of Licensing's Inspection/Violation Reports on the center, which are issued after every State licensing inspection of our center. If there is a licensing complaint investigation, you are also entitled to review the Bureau's Complaint Investigation Summary Report, as well as any letters of enforcement or other actions taken against the center during the current licensing period. Let us know if you wish to review them and we will make them available for your review.

Our center must cooperate with all DCF inspections/investigations. DCF staff may interview both staff members and children.

Our center must post its written statement of philosophy on child discipline in a prominent location and make a copy of it available to parents upon request. We encourage you to review it and to discuss with us any questions you may have about it.

Our center must post a listing or diagram of those rooms and areas approved by the Bureau for the children's use. Please talk to us if you have any questions about the center's space.

Our center must offer parents of enrolled children ample opportunity to participate in and observe the activities of the center. Parents wishing to participate in the activities or operations of the center should discuss their interest with the center director, who can advise them of what opportunities are available.

Parents of enrolled children may visit our center at any time without having to secure prior approval from the director or any staff member. Please feel free to do so when you can. We welcome visits from our parents.

Our center must inform parents in advance of every field trip, outing, or special event away from the center, and must obtain prior written consent from parents before taking a child on each such trip.

Our center is required provide reasonable accommodations for children and/or parents with disabilities and to comply with the New Jersey Law Against Discrimination (LAD), P.L. 1945, c. 169 (N.J.S.A. 10:5-1 et seq.). Anyone who believed the center is not compliance with these laws may contact the Division on Civil Rights in the NJ Department of Law and Public Safety for information about filing an LAD claim at (609) 292-4605 (TTY users may dial 711 to reach the New Jersey Relay Operator and ask for (609) 292-7701), or may contact the United States Department of Justice for information about filing an ADA claim at 1(800)514-0301 (voice) or (800)514-0383 (TTY).

Anyone who has reasonable cause to believe that an enrolled child has been or is being subjected to any form of hitting, corporal punishment, abusive language, ridicule, harsh, humiliating or frightening treatment, or any other kind of child abuse, neglect, or exploitation by any adult, whether working at the center or not, is required by State law to report the concern immediately to the State Central Registry Hotline, toll free at 877 NJ ABUSE/ (877)652-2873. Such reports may be made anonymously. Parents may secure information about child abuse and neglect by contacting: DCF, Office of Communications and Legislation at (609) 292-0422 or go to www.nj.gov/dcf and select Publications.

Be sure to sign the "Information to Parent Signature Statement" below the Transportation information.

Project LEAL Registration 2016-17

Office use:

Completed forms, along with fees for two months per child will be accepted by mail only, postmarked no earlier than June 24th and no later than August 24th. If forms are received after August 24th, the start date for AM or PM LEAL will be the following Monday, instead of the first day of school. Forms will not be processed and will be returned if they are; incomplete, postmarked before June 24th or do not include two months fees per child. Payments are non-refundable.

Child's First Name: _____ MI: _____ Last Name: _____

Home Phone: _____ **Grade:** K 1 2 3 4 5 6 7 8 **School:** _____

Teacher: _____ **Male/Female** **DOB:** ____/____/____ **Shirt Size:** Youth: M L Adult: S M L XL

☐ **Mother** ☐ **Guardian/Other (indicate relationship):** _____

First Name: _____ MI: _____ Last Name: _____

Address: _____ Town, State, Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Work Phone: (____) _____ ext. _____ Employer: _____

E-Mail: _____

☐ **Father** ☐ **Guardian/Other (indicate relationship):** _____

First Name: _____ MI: _____ Last Name: _____

Address: _____ Town, State, Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Work Phone: (____) _____ ext. _____ Employer: _____

E-Mail: _____

Emergency Contact First Name: _____ Last Name: _____

Address: _____ Town, State, Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Work Phone: (____) _____ ext. _____ Employer: _____

(Must be an adult other than the guardian and needs to be within 15 minutes of the Project LEAL Site.)

AM LEAL (grades K-5)		Circle the correct information for AM and/or PM LEAL then place total in the payment box.	PM LEAL (grades K-8)	
7:00 am	\$87 per month per child		M T W T F	
7:30 am	\$60 per month per child		4 day plan week plan	\$191per month
8:00am	\$48 per month per child		5 days per week plan	\$235 per month

In order for children to start on the first day of school, all forms along with the September & October payment must be received by August 24th.

Project LEAL payments are due one month in advance by the 10th.

If you register during the school year (September-June) be sure to submit all completed forms, a payment for the current month and a payment for the next month - one week prior to the start date.

If there is a separation in the family, please indicate the following:

Custody: Both parents Mother Only Father Only Guardian

Release to: Both parents Mother Only Father Only Guardian

Name/Relationship: _____

If the non-custodial party is prohibited from picking up the child you must provide a copy of the court document to support this statement when you register.

Guardian's signature: _____

Financial Assistance is available.

Call Community Child Care Solutions (732) 324-4357.

To make payment plans call 732-247-0922 x 475.

AM Fee	\$
PM Fee	\$
Sub Total	\$
Full time discount -\$20 if in AM & PM 5 days/week	- \$
Additional child 50% off (applies to equal/lesser value)	\$
MONTHLY TOTAL	\$
Payments are due one month in advance by the 10 th for the remainder of the year.	

For the quickest response email: Giovanna, gbranciforte@northbrunswicknj.gov or Tangie, tcobb@northbrunswicknj.gov

Payments by Visa/ MasterCard (in-person only), check or money order. NO CASH. Checks are payable to: Township of North Brunswick - Project LEAL We do not honor refunds, all payments are final. **When our office receives your registration form we make a commitment to your family to provide childcare for the upcoming months, saving a spot for your child/children in our program until you withdraw.**

You are responsible for payment for services until we receive a letter stating that services are to be discontinued. This cannot be accomplished at your child's school. It must be taken care of at the DPRCS Office.

Payment and correspondence should be mailed to Project LEAL, 710 Hermann Road, North Brunswick.

COMPLETE, SIGN & RETURN

For office use	Dates	Check#	Amount	Notes
Sept				
Oct				

List the full name, school and grade of each child you have enrolled in our program

Name	School	Grade	Name	School	Grade

TRANSPORTATION RELEASE: Transportation and field trips are a traditional part of the after school program sponsored by Project LEAL. Both buses and vans are used to transport participants to a variety of programs and activities. Special events may entail walking trips close to the program site, or trips to local attractions or events throughout the tri-state area. I understand every possible precaution will be exercised to assure the safety and welfare of my child while they are being transported by DPRCS. I will always be notified in advance of any special event or trip which differs from a daily schedule. I hereby give my permission for my child to be transported by DPRCS and participate in any field trips or special events:

➔ **Signature of Parent/ Guardian:** _____ **Date:** _____

Hold Harmless Release Form

MEDICAL RELEASE: I recognize that participation in contact sports and other activities may occasionally lead to injury. The most common injuries are abrasions, bruises, sprains, and strains. Less common injuries, but perhaps more serious, may occur. I hereby authorize emergency medical care for my child(ren) or myself. If, in the judgment of the staff, treatment is required for injury or illness, I hereby authorize the administering of anesthetics and recourse to other procedures deemed necessary by the attending physician. I recognize that I am financially responsible for any expenses for medical care or transportation incurred.

List any allergies: _____

List any medications your child is currently taking: _____

My child has the following physical/medical conditions or learning disability you should know about:

(If your child has any special needs, please notify our office prior to registering so we can assess your family's needs.)

I prefer (circle one): **St. Peter's Medical Center** or **Robert Wood Johnson University Hospital**

The Physician of my choice is: _____ **Doctor's Phone:** _____

I _____ verify to the best of my knowledge my child is in good health.
(print parent/guardian name)

➔ **Signature of Parent/ Guardian:** _____ **Date:** _____

HOLD HARMLESS AGREEMENT: I agree to abide by the conditions herein and agree to hold harmless, waive, and release any and all rights to claims for damages against the Department of Parks , Recreation & Community Services, Township of North Brunswick, North Brunswick Board of Education, its agents and employees, and other such individuals who may be involved in the planning and implementation of this/these programs.

➔ **Signature of Parent/ Guardian:** _____ **Date:** _____

DYFS - Information to Parent Signature Statement

In keeping with the New Jersey's child care licensing requirements, we are obliged to provide you, as a parent of a child enrolled at our center, with this informational statement.

This statement highlights, among other things: your right to visit and observe our center at any time without having to secure prior permission; the center's obligation to be licensed and to comply with licensing standards; and the obligation of all citizens to report suspected child abuse or neglect or exploitation the State's Division of Youth and Family Services (DYFS). www.state.nj.us/humanservices/dyfs/child_care_manual_toc.html

Please read this statement carefully and, if you have any questions, feel free to contact me at Department of Parks, Recreation and Community Services, (732) 247-0922 ext. 475.

I have read and received a copy of the Information to Parents Statement prepared by the Bureau of Licensing in the Division of Youth and Family Services.

➔ **Signature of Parent/ Guardian:** _____ **Date:** _____

COMPLETE, SIGN & RETURN